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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 09/617,590 Confirmation No.: 8637
Applicant : YE, Sha et al.
Filed : July 18, 2000
TC/A.U. : 3627
Examiner : L. JASMIN

Docket No. : PORTP007
Customer No. : 26541
Title : RATING BILLING EVENTS IN REAL TIME
 : ACCORDING TO ACCOUNT USAGE INFORMATION

Commissioner for Patents
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AMENDMENT A

Sir:

In response to the Office Action of February 17, 2004, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 11 of this paper.



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PTO/SB/21 (08-03)

Approved for use through 8/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/617,590	
	Filing Date	July 18, 2000	
	First Named Inventor	Sha Ye et al.	
	Group Art Unit	3627	
	Examiner Name	L. Jasmin	
Total Number of Pages in This Submission	19	Attorney Docket Number	PORTP007

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached (Check \$950)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply (14 pages)	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request (in duplicate)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Return Postcard (1 page)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 50-1652.
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm and Individual name	RITTER, LANG & KAPLAN LLP Michael J. Ritter, Reg. No. 36,653
Signature	
Date	August 17, 2004

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